

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	M P		7-26-01
O.I.P.E. CLASSIFIER			8-1-01
FORMALITY REVIEW	CH	1119	09-03-01
RESPONSE FORMALITY REVIEW	H-L	1079	12-13-01

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 : ..... Restricted O ..... Objected

Claim	Date
Final	
Original	
1	✓ ✓ ✓
2	✓ ✓
3	✓ ✓
4	✓ ✓
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12	✓ ✓
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17	
18	✓
19	✓
20	○ ○
21	✓ ✓
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24	
25	
26	✓
27	○ ○
28	✓ ✓
29	✓ ✓
30	✓ ✓
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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